

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN THE APPLICATION OF:

APPLICANT : SANDY BALLARD

SERIAL NO. : Unassigned ART UNIT: Unassigned

FILED : Herewith EXAMINER: Unassigned

FOR : CLOTHING FOR ALZHEIMER'S PATIENTS

ASSISTANT COMMISSIONER OF PATENTS  
WASHINGTON, DC 20231

Sir:

INFORMATION DISCLOSURE STATEMENT  
35 U.S.C. 6; 37 C.F.R. 1.97; 1.98

Submitted herewith are copies of related art domestic patents, foreign patents and/or publications identified and discussed in the specification of the above identified application under the heading: "DESCRIPTION OF THE RELATED ART." These are identified on the attached PTO-1449 form.

The discussion of these related art patents and/or publications in the attached specification is believed to satisfy the duty to disclose requirements as set forth in the above identified statute and rules.

Respectfully submitted,



Richard C. Litman  
Registration No. 30,868  
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RCL: swk

FORM PTO-1449 U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE  INFORMATION DISCLOSURE CITATION IN AN APPLICATION  (Use several sheets if necessary)	ATTY DOCKET NO. 23861.00	SERIAL NO.
	APPLICANT Sandy BALLARD	
	FILING DATE	GROUP

### U.S. PATENT DOCUMENTS

Examiner Initials		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE If appropriate
		Des. 97,980	12/1935	Baum	n/a	n/a	11/1935
		Des. 105,674	08/1937	Sheer	n/a	n/a	08/1937
		Des. 112,725	12/1938	Weiner	n/a	n/a	11/1938
		Des. 136,416	09/1943	Pons	n/a	n/a	07/1943
		2,923,009	02/1960	Cookman	2	227	08/1957
		3,800,330	04/1974	Bowcut	2	227	02/1972
		4,370,757	02/1983	Richmond	2	400	03/1982
		4,914,756	04/1990	Grassick	2	227	02/1989

### FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	Translation YES NO	
		DE 4,304,358	08/1994	Germany	A41	D13/12	x	
		FR 2,809,934	12/2001	France	A41	D13/12	X	

### OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, etc.)


EXAMINER	DATE CONSIDERED
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EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include a copy of this form with next communication to applicant.

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Examiner Initials		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE If appropriate	
		5,911,312	06/1999	Holyfield	2	69	03	1997

### OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, etc.)


EXAMINER	DATE CONSIDERED
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